



Form CT-990T Connecticut Unrelated Business Income Tax Return



File and pay Form CT-990T electronically using myconneCT at portal.ct.gov/DRS-myconneCT

			(T	ile and pay Form C	71-9901 electronica	ny using myconnec	at portal.ct.gov/DKS-r	nyconnec i.	
Enter Inc	come Year Beginning		- 2021 a	and Ending ►	— — — — — — — — — — — — — — — — — — —	(Y 			
Organi	ization name				•		Registration Number		
Numbe	er and street			PO Box	•	Federal Employe	r ID Number (FEIN)		
City, to	own, or post office		State	ZIP code					
Check A	All Applicable Bo	exes:							
•	Organization is annualizing its income.								
Chang	ge of: ►	Mailing address	S ► Closi	ng month (Atta	ch explanation)				
Return	n status:	Amended retur	n ► Initia	l return >	Final retur	n			
If final	return:	Dissolved	▶ With	drawn ▶		organized: ivor's CT Tax R	eg. Number.		
Tymo	of organizations b	Corporatio	n b	401(a) or 409	2(a) truct >	Other trust			
туре о	of organization: ► ►	Corporatio Other: Exp		401(a) or 408	o(a) iiusi 🕨	Other trust			
1. Date	e unrelated trade or	business began	in Connecticu	t: –	_				
		·) - <u>Y Y Y Y</u>				
2. Natu	ure of unrelated trad	le or business in	come activity:						
3. Cor	poration only: Ente	er state of incorp	oration:		Date	of organization		<u> </u>	
Date q	ualified in Connection	cut if not incorpo	rated in Conne			YY			
DECLARATION: I declare under penalty of law that I have examined this return (including any accompanying schedules and statements) and, to the best of my knowledge and belief, it is true, complete, and correct. I understand the penalty for willfully delivering a false return or document to the Department of Revenue Services (DRS) is a fine of not more than \$5,000, imprisonment for not more than five years, or both. The declaration of a paid preparer other than the taxpayer is based on all information of which the preparer has any knowledge.									
	Name of officer or fid	uciary (print)		Signature of o	fficer or fiduciary		Date (MMDDYY)	YY)	
Sign Here	Officer's email addres	ss (print)							
Keep a	Title			Telephone n	umber	May DRS conta	oct the preparer		
copy of this	Doid property page	o (print)	Doid propersy's			shown below at	oout this return? Preparer's SSN or PT	No	
return for your	Paid preparer's name	e (print)	Paid preparer's	signature	Date (MM	-	Freparer's 33N OF F	IIN	
records.	Firm's name and add	Iress		Firm's	FEIN	Telepho	one number		



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- Attach a Complete Copy of Federal Form 990-T Including all Schedules as Filed With the Internal Revenue Service -

Со	mputation of Income			
1.	Federal unrelated business taxable income from 2021 federal Form 990-T	1.	•	.00
2.	Federal net operating loss deduction claimed on 2021 federal Form 990-T	2.	•	.00
3.	Federal deduction for Connecticut tax on unrelated business taxable income	3.	▶	.00
4.	Total: Add Lines 1, 2, and 3.	4.	•	.00
5.	Refund or credit for overpayment of Connecticut tax included in federal unrelated business taxable income	5.	•	.00
6.	Unrelated business taxable income: Subtract Line 5 from Line 4.	6.	•	.00
Со	mputation of Tax			
1.	Unrelated business taxable income from Line 6 above. If 100% Connecticut, enter also on Line 3	1.	•	.00
2.	Apportionment fraction from Schedule A, Line 5 on Page 3. Carry to six places.	2.	•	
3.	Connecticut unrelated business taxable income: Line 1 or Line 1 multiplied by Line 2.	3.	•	.00
4.	Operating loss carryover from <i>Schedule B</i> , Line 21 on Page 4. Do not exceed 50% of Line 3	4.	•	.00
5.	Income subject to tax: Subtract Line 4 from Line 3.	5.	•	.00
6.	Tax: Multiply Line 5 by 7.5% (.075).	6.	•	.00
Co	mputation of Amount Payable			
1.	Tax: Include surtax if applicable. See instructions.	1.	•	.00
2.	Reserved for future use	2.		
3.	Total Tax: Enter the amount from Line 1.	3.	•	.00
4.	Tax credits from Form CT-1120K, Part III, Line 9. Do not exceed amount on Line 1.	4.	•	.00
5.	Balance of tax payable: Subtract Line 4 from Line 3. If zero or less, enter "0."	5.	•	.00
6a.				.00
6b.				.00
6c.	Overpayment from prior year	6c.	•	.00
6.	Tax Payments: Enter the total of Lines 6a, 6b, and 6c.			.00
7.	Balance of tax due (overpaid): Subtract Line 6 from Line 5.	7.	•	.00
8a.	Penalty	8a.	•	.00
8b.	Interest	8b.	•	.00
8c.	Form CT-1120I Interest	8c.	•	.00
8.	Total penalty and interest: Enter the total of Lines 8a, 8b, and Line 8c.	8.		.00
9a.	Amount to be credited to 2022 estimated tax			.00
9b.	Amount to be refunded	9b.	•	.00
9.				.00
	For faster refund, use Direct Deposit by completing Lines 9c, 9d, and 9e.			
9c.	Checking ► Savings ► 9d. Routing # ►			
9e.	Account # ▶			
9f.	Will this refund go to a bank account outside the U.S.? ▶ Yes 9g. Bank name ▶			
10.	Balance due with this return: Add Line 7 and Line 8.	10.	•	.00

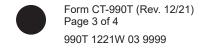




Mail to: Dept. of Revenue Services, State of Connecticut, PO Box 5014, Hartford CT 06102-5014

Make check payable to: Commissioner of Revenue Services







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Schedule A — Unrelated Business Income Apportionment (See instructions.)

Complete this schedule if the taxpayer's unrelated trade or business is conducted at a regular place of business outside Connecticut.

Factor	Item	Column A Connecticut		Column B Everywhere D	Column C ivide Column A by Column B. Carry to six places
	1a.Inventories		.00	.00	
	1b.Tangible property		.00	.00	
Property (Average value)	1c.Real property		.00	.00	
(riverage value)	1d.Capitalized rent		.00	.00	
	1. Total		.00	.00	0.
	2a.Sales of tangibles		.00	.00	
	2b.Services		.00	.00	
Receipts	2c. Rentals		.00	.00	
	2d.Other		.00	.00	
	2. Total		.00	.00	0.
Wages, salaries,					
and other compensation	3. Total		.00	.00	0.
componication					
	0.				
	0.				



2021 Connecticut net operating loss available for carryforward:

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.00

Schedule B — Connecticut Apportioned Operating Loss Carryover Applied to 2021 .00 1. .00 2. .00 3. .00 4. .00 5. .00 6. .00 7. 8. .00 .00 9. .00 .00 11. .00 .00 .00 .00 .00 .00 .00 .00 .00 21. Total: Add Lines 1 through 20. Enter here and on Computation of Tax, Line 4. .00 Schedule C — Computation of Net Operating Loss Carryforward .00 1. .00 2. .00 3. 0. 4.